

CLAIMS ONLY

Application Number 10615-035	Filing Date
Applicant(s)	

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51			
2	/						52			
3							53			
4	/	/					54			
5							55			
6							56			
7							57			
8							58			
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42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	4						Total Indep			
Total Depend	4						Total Depend			
Total Claims	11						Total Claims			